LETTER OF INTENT STATE OF RHODE ISLAND BOARD OF EXAMINERS OF LANDSCAPE ARCHITECTS

CANDI	DATE'S NAME:			SECTION			
(A sep	arate form mus	t be completed t	for each section failed)				
educat Sectio Board to Sectio	ion or experience n A, B, D - Notic for approval prio n C, E, RI State	e subsequent to to be of intent and ar or to registration v Exam - Letter of	m, or a portion of it, after the last examination in accordance of the last examination in accordance of the last examination in accordance of the last examination of it, after the last examination in accordance of the last examination of it, after the last examination of it.	ordance with one of the education required section(s). Four request to retake	he following critement must be standard for Sections C,	eria. submitted to the	
			uctor or tutor must be	received in this o	ffice prior to	CLARB's	
			uctor or tutor must be ration for Sections C. I			ne 1. 2006 for	
1)	Additional course work at an institution accepted by the Board. One semester course. (Please describe course in detail and list instructor's name and address)						
	tana Nama		Address	Oite.	01-1-	7:	
Instruc	tor: Name		Address	City	State	Zip	
2)	Tutoring with a qualified tutor. (Please describe tutorial in detail and list tutor's name and address)						
Tutor:	Name	LA#	Address	City	State	Zip	
3)	Job responsibility change under the employ or supervision of a registered landscape architect. (The applicant must present evidence in the form of a letter from the employer or supervisor a minimum of two(2) weeks before being admitted to the exam. The change in responsibility must include a minimum of four (4) months of experience, since last taking the exam, in tasks related to the subject matter of the failed section(s).)						
Name of Employer/Supervisor		rvisor	Address	City	State	Zip	